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PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing OR Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	PPC-787
	First Named Inventor	Carol Gell et al.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	June 12, 2001
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SANITARY NAPKIN WITH ADJUSTABLE LENGTH INTERGLUTEAL STRIP
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) ☐ as United States Application Number or PCT International Application Number
☐ and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

09929494-06101
T02T90-46462860

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to James P. Barr at telephone number (732) 524-2826.

Direct all correspondence to: Customer Number
☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

000027777

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Carol A.

Family Name
or Surname GELL

Inventor's
Signature

Date

Residence: City Belle Mead

State NJ

Country USA

Citizenship USA

Mailing Address 34 Jamestown Road

City Belle Mead

State NJ

ZIP 08502

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Safiyya

Family Name
or Surname SHABAZZ-HOUSTON

Inventor's
Signature

Date

Residence: City Lawrenceville

State NJ

Country USA

Citizenship USA

Mailing Address 912 White Pine Circle

City Lawrenceville

State NJ

ZIP 08648

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James P.

Family Name
or Surname BARR

Inventor's
Signature

Date

Residence: City East Amwell

State NJ

Country USA

Citizenship USA

Mailing Address 64 Van Lieus Road

City East Amwell

State NJ

ZIP 08551

Country USA

0544-9427-0000

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NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Tara		Family Name or Surname GLASGOW	
Inventor's Signature		Date	
Residence: City New Hope	State PA	Country USA	Citizenship USA
Mailing Address 212 Riverwoods Drive			
City New Hope	State PA	ZIP 18938	Country USA

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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Raymond J.		Family Name or Surname HULL, Jr.	
Inventor's Signature		Date	
Residence: City Hampton	State NJ	Country USA	Citizenship USA
Mailing Address 408 Rick Road			
City Hampton	State NJ	ZIP 08827	Country USA

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NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Marina		Family Name or Surname NIKITINA	
Inventor's Signature		Date	
Residence: City New Britain	State PA	Country USA	Citizenship USA
Mailing Address 236 Willow Wood Drive			
City New Britain	State PA	ZIP 18901	Country USA

095494-06120

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NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Pramod S.		Family Name or Surname MAVINKURVE	
Inventor's Signature		Date	
Residence: City Princeton	State NJ	Country USA	Citizenship usa
Mailing Address 328 Dodds Lane			
City Princeton	State NJ	ZIP 08540	Country USA

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NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Kenneth Anthony		Family Name or Surname PELLEY	
Inventor's Signature		Date	
Residence: City Hopewell	State NJ	Country USA	Citizenship USA
Mailing Address 104 Stonybrook Road			
City Hopewell	State NJ	ZIP 08525	Country USA

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NAME OF NINTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Kendra S.		Family Name or Surname ROSE	
Inventor's Signature		Date	
Residence: City Chicago	State IL	Country USA	Citizenship USA
Mailing Address 1320 W. Diversey Parkway			
City Chicago	State IL	ZIP 60614	Country USA

093944-061201

09379494.064200

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NAME OF TENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Martha		Family Name or Surname TAYLOR	
Inventor's Signature		Date	
Residence: City Mercerville	State NJ	Country USA	Citizenship USA
Mailing Address 667 Paxson Avenue			
City Mercerville	State NJ	ZIP 08619	Country USA

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NAME OF ELEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

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NAME OF TWELFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country